

Sandy Bottom Nature Park
1255 Big Bethel Road
Hampton, Va. 23666
Phone: (757) 825-4495 Fax: (757) 825-4658

Junior Volunteer Application

Personal Information:

Date: _____

Name: _____ Nickname: _____
Last First Middle

Address: _____ City: _____ State: _____ Zip: _____

Phone:(H) _____ (W) _____ Other _____

Birthday (M/D/Y): ____/____/____ Age: ____ Grade: ____ School: _____

Email Address: _____ May we add you to our volunteer mailings? Yes ___ No ___

Parent/Guardian Information:

Name: _____
Last First Middle

Phone:(H) _____ (W) _____ Other _____

Parent/Guardian Permission: *Applications will not be accepted without a parent/guardian's signature. Parents will be contacted for verification.*

My son/daughter _____ has my permission to participate as a volunteer at Sandy Bottom Nature Park and/or Bluebird Gap Farm. My son/daughter currently has a GPA of C or above and will maintain such average while volunteering.

Signed: _____ Date: _____

Emergency Contact Information:

Name: _____
Last First Middle

Phone:(H) _____ (W) _____ Other _____

Please continue on other side

Volunteer Information:

Skills and Interest: _____

Special Achievements/Awards: _____

Previous Volunteer Experience/Organizations: _____

Why would you like to volunteer with us?: _____

In what area(s) would you like to volunteer? _____

Please list the days and hours you are available to volunteer:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Do you have any health limitations that could affect your volunteer assignment? Yes___ No___ If yes, please explain: _____

Volunteer Certification:

I certify that the above information is complete and true to the best of my knowledge and has been given voluntarily. I authorize Sandy Bottom Nature Park and/or Bluebird Gap Farm to contact employers and references listed above concerning my work experience. I understand that discovery of any misrepresentation or omission of the facts in this application may be cause of my immediate dismissal.

Volunteer Signature: _____ Date: _____

Staff Signature: _____ Date: _____